

## FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

| <b>Title of<br/>Invention</b>  | Sealant Plug Delivery Methods |                 |  |             |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
|--|-------------------------------|-----------------|--|-------------|-------------|--------------------|------------------|-----|------|---|---|------------------------|--|------|----|-----|--|--|--|--|--|
| Application Number :<br>Date :<br>First Named Applicant: John S Fisher<br>Attorney Docket Number: 1139.26.CN   |                               |                 |  |             |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
| <b>TOTAL FEE AUTHORIZED \$ 600</b><br><br>Patent fees are subject to annual revisions on or about October 1st of each year.  |                               |                 |  |             |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
| Filing as small entity<br><br>BASIC FILING FEE   |                               |                 |  |             |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
| <table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>385</td><td>385</td></tr><tr><td colspan="3"></td><td>Subtotal For Basic Filing Fees: \$ 385</td></tr></tbody></table>   |                               | Fee Description | Fee Code                               | Amount \$   | Fee Paid \$ | Utility Filing Fee | 2001             | 385 | 385  |   |   |                        | Subtotal For Basic Filing Fees: \$ 385 |      |    |     |  |  |  |  |  |
| Fee Description  | Fee Code                      | Amount \$       | Fee Paid \$                            |             |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
| Utility Filing Fee   | 2001                          | 385             | 385                                    |             |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
|  |                               |                 | Subtotal For Basic Filing Fees: \$ 385 |             |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
| EXTRA CLAIM FEES   |                               |                 |  |             |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
| <table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 8</td><td>0</td><td>2202</td><td>9</td><td>0</td></tr><tr><td>Independent Claims : 8</td><td>5</td><td>2201</td><td>43</td><td>215</td></tr><tr><td colspan="3"></td><td colspan="2">Subtotal For Extra Claims Fees: \$ 215</td></tr></tbody></table> |                               | Fee Description | Extra Claim                            | Fee Code    | Amount \$   | Fee Paid \$        | Total Claims : 8 | 0   | 2202 | 9 | 0 | Independent Claims : 8 | 5                                      | 2201 | 43 | 215 |  |  |  | Subtotal For Extra Claims Fees: \$ 215 |  |
| Fee Description  | Extra Claim                   | Fee Code        | Amount \$                              | Fee Paid \$ |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
| Total Claims : 8   | 0                             | 2202            | 9                                      | 0           |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
| Independent Claims : 8   | 5                             | 2201            | 43                                     | 215         |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
|  |                               |                 | Subtotal For Extra Claims Fees: \$ 215 |             |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |
| <b>AUTHORIZED BILLING INFORMATION</b><br><b>The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b><br><br>Credit account number: 3008<br>Expiration Date (YYYYMMDD): 2008-05-31<br>Authorized name: Anton J Hopen<br>Billing address: 33760  |                               |                 |  |             |             |                    |                  |     |      |   |   |                        |  |      |    |     |  |  |  |  |  |